Docket No.: 117174

APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention of

described and clair	med in the spo	ecification:				
Check one	attached he	preto				
а. <u>к</u> b. Г			No and am	ended on		
٠. ا	(if applica	ble).	and and	chided on		
		nave reviewed and understand the con	ntents of the above-identified specific	cation, including the claims, as		
amended by any ar				. 1 12: 1 7 3 7 70 4		
Code of Federal R	egulations, §1	ty to disclose to the Office all informat .56.	on known to me to be material to pat	entability as defined in Title 37		
Under T application(s) filed	itle 35, U.S. by me or my	Code §119, the priority benefits of the legal representatives or assigns with	ne following foreign application(s) and none year prior to this application are	nd/or United States provisional e hereby claimed:		
(1) Japanes	se Patent A	oplication No. 2002-276024 filed	on September 20, 2002			
		oplication No. 2003-287429 filed				
States of America	either (a) mo	ation(s) for patent or inventor's certifice than one year prior to this applications provisional application(s):	cate on this invention were filed in on, or (b) before the filing date of th	countries foreign to the United e above-named foreign priority		
		following as my attorneys of record siness in the Patent Office:	with full power of substitution an	d revocation to prosecute this		
approacion and to		James A. Oliff, Reg. No. 27,075; Wil	liam P. Rerridge Reg No 30 024			
]	Kirk M. Hudson, Reg. No. 27,562; T	homas J. Pardini, Reg. No. 30,411;			
]	Edward P. Walker, Reg. No. 31,450;	Robert A. Miller, Reg. No. 32,771;			
	Mario A.	Costantino, Reg. No. 33,565; and S	tephen J. Roe, Registration No.	34,463.		
ALL CORRESPO PLC, P.O. BOX 1	ONDENCE I 9928, ALEX	N CONNECTION WITH THIS AF ANDRIA, VIRGINIA 22320, TELE	PLICATION SHOULD BE SENT PHONE (703) 836-6400.	TO OLIFF & BERRIDGE,		
own knowledge are were made with the	e true and that e knowledge tle 18 of the	have reviewed and understand the control all statements made on information that willful false statements and the lideral states Code and that such willful false that such willful false that such willful false.	and belief are believed to be true; ar ke so made are punishable by fine or	nd further that these statements		
ypewritten Full Nan	ne					
f First or Sole Inventor		Naoyuki		Egusa		
		Given Name	Middle Initial	Family Name		
Inventor's Signature:		Nacyaki		Egusor		
Date of Signature:		September 10, 20)3			
Residence:		Month Ashigarakami-gun	Day Kanagawa	Year		
	City		State or Province	Japan		
Citizenship:	Japanese		State of Province	Country		
	Post Office Address:					
	(Insert complete mailing address,					
	mailing add	rece		· · · · · · · · · · · · · · · · · · ·		

Ashigarakami-gun, Kanagawa, Japan

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^{*}If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

^{**}Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

1	Typewritten Full Nan	пе			
	of Second Joint Inve	ntor (if any)	Tetsuro		Kodera
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	e:	Tetsuro		Kiera
3	**Date of Signature:		September	10, 2003	
			Month	Day	Year
	Residence: Ashigaraka		ni-gun	Kanagawa	Japan
	City			State or Province	Country
	Citizenship: Japanese				
		Post Office Address: (Insert complete	c/o FIIII XFROX	CO., LTD., 430, Sakai, Nak	ai-machi
		mailing address,	GOTOTALKOA	., L1D., 430, Gunui, I van	ur mucin,
		including country)	Ashigarakami-gun,	Kanagawa, Japan	
1	Typewritten Full Nan	ne		, , ,	
•	of Third Joint Invent				
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	e:			· · · · · · · · · · · · · · · · · · ·
3	**Date of Signature:				
		Month		Day	Year
	Residence:				Japan
		City		State or Province	Country
	Citizenship:	·			•
	-	Post Office Address:			
		(Insert complete			
		mailing address,			
		including country)			
1	Typewritten Full Nan				
	of Fourth Joint Inver	ntor (if any)			
			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	<u></u>			
3	**Date of Signature:				
			Month	Day	Year
	Residence:				
		City		State or Province	Country
	Citizenship:	Japanese			
		Post Office Address:			
		(Insert complete			
		mailing address,		-	
		including country)			
1	Typewritten Full Nan				
	of Fifth Joint Invento	or (if any)			
_			Given Name	Middle Initial	Family Name
2	**Inventor's Signature	<u> </u>			
3	**Date of Signature:				
			Month	Day	Year
	Residence:			•	
		City		State or Province	Country
	Citizenship:	,			 ,
	-	ce Address:			<u>.</u>
	1000 0111	(Insert complete			
		mailing address,			
		including country)			

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.